

Delivering the Services and Submitting the Bill

Highlights of the Last Steps

The Flow

- Using Person Centered thinking, the PCP has been developed.
- Decisions have been made regarding which services should be used to deliver and carry out the strategies needed to accomplish the goals.
 - Utilize evidence based practices when in existence
 - Utilize acceptable standards of care
 - Identify curricula
- Engage the families/consumers in the selection of their providers.
 - Work with families/consumers in judging the quality of providers

The Flow (cont.)

- Make referrals to appropriate agencies/providers.
 - Obtain authorization
 - Further breakdown any additional goals/objectives that build upon the PCP
- Engage families in the hiring of their individual workers.
- Ongoing process

Delivering the Service

- Understand the service definition
- Confirm goals/strategies and authorizations – making sure the family/consumer understands the purpose of the service or services.
- Confirm schedule
- Train staff on goals/objectives and techniques/strategies to be used. Be sure to cover crisis situations, recipient uniqueness, data collection and documentation requirements.
- Deliver the service

Getting Paid

- Link documentation, PA, staff qualifications and other QA functions to the actual claim.
 - Depending on your risk management/QA plan, conduct associated QA functions prior to claim submission
- Submit claim
- Receive payment and adjudicate claim with documentation/billing
- Follow up on denied claims by checking EOB, denial codes, etc.
 - While IT system changes are still being made, submit EPSDT overrides as needed
- Conduct post payment QA functions and follow through on corrective actions as needed

Getting Paid (cont.)

- QA is ongoing process – just because it was right today, doesn't mean it will still be ok tomorrow if not checked regularly
 - Staff training
 - Family/consumer training
 - Clinical reviews/supervision
 - Documentation
 - POC modification
- The cycle starts over
